APPENDIX A-4: XML Schema Layout for MassHealth Specific Measures (MAT 4, NEWB 1, CCM 1, CCM 2, CCM 3)

XML Element	Attributes	Description	Data Element	Valid Values	Data Types	Field Size	Data Required (MassHealth)
A header is required at the beginning of each XML file as follows: <?xml version="1.0" encoding="UTF-8" ?>							
\<submission>	Opening tag is required.						
	type	Describes the setting for which data is being submitted.	N/A	HOSPITAL	Character	20	Yes
	data	Describes the type of data being submitted.	N/A	CLINICAL	Character	20	Yes
	version	The version of the file layout.	N/A	3.0	Character	20	Yes
	action-code	Describes the intended action of the file being submitted.	N/A	ADD	Character	20	Yes
\<file-audit-data> sub-element of the submission data element	Opening tag for file audit data	**Note**: This tag and the entire \<file-audit-data> section are optional in the XML document. If submitted, this tag contains no data. Required if sub-elements are included.					
\<create-date> sub-element of the file audit data element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data: \<create-date>05-10-2007\</create-date>**						
	None	The month, day, and year the XML file was created	N/A	MM-DD-YYYY (Must be a valid date)	Date	10	Yes
\<create-time> sub-element of the file audit data element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **\<create-time>23:01\</create-time>**						
	None	The hour and minutes representing the time the file was created	N/A	HH:MM (military format with or without colon)	Time	5	Yes
\<create-by> sub-element of the file audit data element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **\<create-by>VendorA\</create-by>**						
	None	The entity that created the file	N/A		Character	50	Yes
\<version> sub-element of the file audit data element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **\<version>1.0\</version>**						
	None	The version of the file being submitted	N/A		Character	20	Yes
\<create-by-tool> sub-element of the file audit data element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data**: **\<create-by-tool>CART4.1\</create-by-tool>**						
	None	Tool used to create the XML file	N/A		Character	50	Yes
\</file-audit-data>	Closing tag for file audit data	**Note**: This tag and the entire \<file-audit-data> section are optional in the XML document, but if the opening tag of \<file-audit-data> is provided, then this closing tag is required as well.					
\<provider> Sub-element of the submission data element	Opening tag for provider	**Note**: This tag is required in the XML document. However, it contains no data.					

APPENDIX A-4: XML Schema Layout for MassHealth Specific Measures (MAT 4, NEWB 1, CCM 1, CCM 2, CCM 3)

XML Element	Attributes	Description	Data Element	Valid Values	Data Types	Field Size	Data Required (MassHealth)
<provider-id> sub-element of the submission element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<provider-id>**1234567890**</provider-id>**					
	None	Used to identify the provider. This will be either a valid 6-digit Medicare or 10-digit Medicaid provider ID.	Provider ID	Valid 6 or 10 digit ID	Character	10	Yes (Conditionally)
<npi> sub-element of the provider element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<npi>**1234567890**</npi>**					
	None	National Provider Identifier as assigned by CMS **Please Note:** If the <provider-id> value is NOT provided then a valid <npi> number is REQUIRED.	National Provider Identifier (NPI)	Valid 10 digit NPI Number	Character	10	Yes (Conditionally)
<hcoid> sub-element of the provider element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<hcoid>**123456**</hcoid>**					
	None	Used to identify the healthcare organization	Health Care Organization Identifier	See ORYX Technical Implementation Guide	See ORYX Technical Implementation Guide	See ORYX Technical Implementation Guide	No
<patient> sub-element of the provider element	Opening tag for patient	**Note**: This tag is required in the XML document. However, it contains no data.					
<first-name> sub-element of the patient element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<first-name>**John**</first-name>**					
	None	The patient's first name	First Name	Patient's First Name	Character	30	Yes
<last-name> sub-element of the patient element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<last-name>**Doe**</last-name>**					
	None	The patient's last name	Last Name	Patient's Last Name	Character	60	Yes
<birthdate> sub-element of the patient element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<birthdate>**08-06-1964**</birthdate>**					
	None	The month, day, and year the patient was born	Birthdate	MM-DD-YYYY (Must be a valid birthdate and cannot equal UTD)	Date	10	Yes
<sex> sub-element of the patient element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<sex>**M**</sex>**					
	None	The patient's sex	Sex	M,F,U	Character	1	Yes
<race> sub-element of the patient element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<race>**1**</race>**					
	None	Documentation of the patient's race	Race	1,2,3,4,5,7	Numeric	1	Yes

APPENDIX A-4: XML Schema Layout for MassHealth Specific Measures (MAT 4, NEWB 1, CCM 1, CCM 2, CCM 3)

XML Element	Attributes	Description	Data Element	Valid Values	Data Types	Field Size	Data Required (MassHealth)
\<ethnic\> sub-element of the patient element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data: \<ethnic\>Y\</ethnic\>**						
	None	Documentation that the patient is Hispanic/Latino/Spanish	Hispanic Indicator	Y,N	Character	1	Yes
\<episode-of-care\> sub-element of the patient element	Opening tag for episode of care	**Example with data: \<episode-of-care measure-set ="MAT-4"\>**					
	measure-set	The code for the measure set submitted.	Measure set	MAT-4 NEWB-1 CCM	Character	22	Yes
\<admit-date\> sub-element of the episode-of-care element	measure-set						
	None	The month, day, and year of admission for inpatient care	Admission Date	MM-DD-YYYY (Must be a valid date and cannot equal UTD)	Date	10	Yes
\<discharge-date\> sub-element of the episode-of-care element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data: \<discharge-date\>**04-06-2007**\</discharge-date\>**						
	None	The month, day, and year the patient was discharged from acute care, left against medical advice, or expired during this stay.	Discharge Date	MM-DD-YYYY (Must be a valid date and cannot equal UTD)	Date	10	Yes
\<pthic\> sub-element of the episode-of-care element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data: \<pthic\>**123456789A**\</pthic\>**						
	None	HIC# of the patient The patient's Medicare health insurance claim number.	Patient HIC#	· No embedded dashes or spaces or special characters · Must have both alpha and numeric characters · Alpha characters must be upper case · Length cannot be more than 12 or less than 7 characters · For alphanumeric, do not allow all numeric values to be 9's. For example, do not allow 1 alpha + 999999999, etc.	Character	7-12	No

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XML Element	Attributes	Description	Data Element	Valid Values	Data Types	Field Size	Data Required (MassHealth)
\<vendor-tracking-id\> sub-element of the episode-of-care element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **\<vendor-tracking-id\>**123456789012**\</vendor-tracking-id\>**						
	None	Used by the vendor to identify the episode of care	Vendor Tracking ID	Up to 100 characters	Character	Up to 100	No
\<patient-id\> sub-element of the episode-of-care element	Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **\<patient-id\>**74185296374185296385**\</patient-id\>**						
	None	Identifier used to identify the patient at the hospital	**Patient Identifier**	Up to 40 characters	Character	Up to 40	Yes
\<detail\> sub-element of the episode-of-care element	Since this is the opening element, the closing tag for this element will be at the end of the record. Attributes describe the element and are included within the opening and closing <> **Example of Yes/No question (refer to Table A for valid answer codes):** For discharges 4/1/2007 and forward: **\<detai**l answer-code="Y" row-number="0" question-cd="ASPRNRXDIS"> **Example of multiple choice question (refer to Table A for valid answer codes):** **\<detail** answer-code="3" row-number="0" question-cd="ANTIBIRCVD"> **Example of a user-entered code:** **\<detail** answer-code="001.9" row-number="0" question-cd="OTHRDX#">						
	answer-code	ID number of the answer	Not a data element itself; each possible answer has its own unique ID	Refer to Table A for valid values	Character	20	Yes
	question-cd	The field name of the question	Not a data element itself; each data element is a question code	Refer to Table A for valid values	Character	20	Yes
	row-number	Used to group answers together for multi-row, multi-column answers	Not a data element itself; used for grouping answers only	0-75 Depending on the number of rows allowed per question. i.e. Antibiotic Name, Date, Time and Route would have rownumber 0 for the first antibiotic, 1 for the second antibiotic, and so on.	Integer	2	Yes Default to 0. For mulitiple answer options, add 1 to the row number for each additional answer
\<answer-value\> Sub-element of detail	The answer value **Example:** \<answer-value\>No\</answer-value\>	The description of the answer-code	Not a data element itself; each answer has a value	Place the answer text here. Examples: Yes No Male Female 01-01-2006 **Note: All Dates in this field should be formatted as MM-DD-**	Character	2000	No

XML Element	Attributes	Description	Data Element	Valid Values	Data Types	Field Size	Data Required (MassHealth)
</detail>	Closing tag for detail	**Note:** This tag is required in the XML document. However, it contains no data.					
</episode-of-care>	Closing tag for episode of care	**Note:** This tag is required in the XML document. However, it contains no data.					
</patient>	Closing tag for patient	**Note:** This tag is required in the XML document. However, it contains no data.					
</provider>	Closing tag for provider	**Note:** This tag is required in the XML document. However, it contains no data.					
</submission>	Closing tag for submission	**Note:** This tag is required in the XML document. However, it contains no data.					
Retired Elements Effective (v12.0)							
<postal-code> sub-element of the patient element		Each element must have a closing tag that is the same as the opening tag but with a forward slash. **Example with data:** **<postal-code>**50266**</postal-code>**					
	None	The postal code of the patient's residence. For USA zip codes, the hyphen is implied. If the patient is determined to not have a permanent residence, then the patient is considered homeless.	Postal Code	(5 or 9 digit without hyphen, "HOMELESS", or Non-US)	Character	9	Yes